



# SureFire Recovery, Inc.

(858) 618-2650 FAX: (858) 618-2651 or 2652  
www.sfrecoveryinc.com E-mail: sfrecovery@hotmail.com

CLIENT CODE: \_\_\_\_\_

CLIENT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

SIGNATURE VERIFICATION: \_\_\_\_\_

## DIRECT PAYMENT !!!

ONE OF THE ACCOUNTS WE ASSIGNED TO YOU FOR COLLECTION HAS DELIVERED A PAYMENT TO OUR OFFICE !!!

PLEASE CREDIT THE FOLLOWING PAYMENT:

NAME OF THE ASSIGNED CONSUMER: \_\_\_\_\_

REFERENCING ACCOUNT OR FILE NUMBER: \_\_\_\_\_

AMOUNT PAID: \$ \_\_\_\_\_ (SRI will issue a printed receipt to the consumer)

DATE OF PAYMENT: \_\_\_/\_\_\_/\_\_\_

(circle appropriate):

METHOD OF PAYMENT: CASH; CHECK; CASHIERS CHECK; MONEY ORDER;  
MASTERCARD; VISA; AM EX; ACH; OTHER: \_\_\_\_\_

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## A DIRECT PAYMENT DID NOT CLEAR !!!

A PAYMENT RECEIVED IN OUR OFFICE WHICH WE REPORTED TO YOU EARLIER, DID NOT CLEAR THE ASSIGNED CONSUMERS BANK !!!

PLEASE REVERSE THE FOLLOWING PAYMENT:

NAME OF THE ASSIGNED CONSUMER: \_\_\_\_\_

REFERENCING ACCOUNT OR FILE NUMBER: \_\_\_\_\_

BOUNCED AMOUNT: \$ \_\_\_\_\_

DATE THE FUNDS BOUNCED: \_\_\_/\_\_\_/\_\_\_